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|--|--|---|---|--|--------------------------|--|
| CURRENT CORRESPONDENCE 75: Mattingly, Stange 1800 Diagonal Roa Alexandria, VA 22: | er & Malur, P.C. id, Suite 370 | 4 2006 . | Fee(s) Transmittal. T papers. Each addition have its own certifica | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | |
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| | | | | : | | (Date) |
| APPLICATION NO. | FILING DATE | | FIRST NAME | D INVENTOR | ATTORNEY DOCKE | T NO. CONFIRMATION NO. |
| 10/076,513 | 02/19/2002 | Takahisa Miy | | Miyamoto | ASA-1065 | 3429 |
| TITLE OF INVENTION: A | PPARATUS FOR LINKING | G A SAN WITH A | LAN | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | | PUBLICATION FEE | TOTAL FEE(S) DI | JE DATE DUE |
| nonprovisional | МО | \$1400 | | \$300 | \$1700 | 08/04/2006 |
| EXAMINER | | ART UNIT | | CLASS-SUBCLASS | <u> </u> | |
| WONG, WARNER 26 | | | · • | 370-401000 | | |
| Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. | | | 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME AND | RESIDENCE DATA TO B | E PRINTED ON T | THE PATENT | (print or type) | | |
| PLEASE NOTE: Unless | | low, no assignee | data will app | ear on the patent. If an assig | nee is identified below | v, the document has been filed for |
| (A) NAME OF ASSIGNE HITACHI, LT | | (B) RESIDENCE: (CITY and STATE OR COUNTRY) TOKYO, JAPAN | | | | |
| Please check the appropriate | assignee category or category | ries (will not be pr | inted on the p | atent): 🗖 Individual 🖾 (| Corporation or other pri | vate group entity Government |
| 4a. The following fee(s) are enclosed: X | | | b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50 1/17 (enclose an extra copy of this form). | | | |
| | (from status indicated above MALL ENTITY status. See 3 | • | _ | ant is no longer claiming SMA | | |
| • • | | | | | | application identified above. nt; or the assignee or other party in |
| | Musics Pale | L auditate | Office. | 08/07/ | 2006 HBEYENES ROOM | |
| Authorized Signature | John R. Matting |) ly | | Date 1 FC: 02 FC: Registration | 1501 | 1400.00 OP 300.00 OP |

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